

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)**USE FEC MAILING LABEL
OR TYPE OR PRINT**Example: If typing, type
over the lines

Treasure State PAC

ADDRESS (number and street)

PO Box 76187

☐Check if different
than previously
reported. (ACC)

Washington

DC

20013

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00433680

3. IS THIS
REPORT☒NEW
(N)

OR

☐AMENDED
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☐April 15
Quarterly Report(Q1)☐July 15
Quarterly Report(Q2)☐October 15
Quarterly Report(Q3)☐January 31
Quarterly Report(YE)☒July 31 Mid-Year
Report(Non-election
Year Only) (MY)☐Termination Report
(TER)(b) Monthly
Report
Due On:☐

Feb 20 (M2)

☐

May 20 (M5)

☐

Aug 20 (M8)

☐Nov 20 (M11)
(Non-Election
Year Only)☐

Mar 20 (M3)

☐

Jun 20 (M6)

☐

Sep 20 (M9)

☐Dec 20 (M12)
(Non-Election
Year Only)☐

Apr 20 (M4)

☐

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

(c) 12-Day
PRE-Election
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12G)

Election on

in the
State of(d) 30-Day
Post-Election
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the
State of

5. Covering Period

01

01

2009

through

06

30

2009

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Judith Zamore

Signature of Treasurer

Electronically Filed by Judith Zamore

Date

07

29

2009

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office
Use
Only**FEC FORM 3X**
(Rev. 12/2004)

SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

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Write or Type Committee Name
Treasure State PAC

Report Covering the Period:

From:

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	0	9

To:

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	9

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1		
2009		19151.70
(b) Cash on Hand at Beginning of Reporting Period	19151.70	
(c) Total Receipts (from Line 19)	81270.24	81270.24
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	100421.94	100421.94
7. Total Disbursements (from Line 31)	61441.84	61441.84
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	38980.10	38980.10
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00	

☒ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004)

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Write or Type Committee Name

Treasure State PAC

Report Covering the Period:

From:

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	0	9

To:

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	9

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A)	35650.00	35650.00
(ii) Unitemized	5295.00	5295.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)	40945.00	40945.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	38500.00	38500.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	79445.00	79445.00
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	1825.24	1825.24
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	81270.24	81270.24
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	81270.24	81270.24

DETAILED SUMMARY PAGE

of Disbursements

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FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS		COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:			
(a) Shared Federal/Non-Federal Activity (from Schedule H4)			
(i) Federal Share.....	0.00	0.00	
(ii) Non-Federal Share.....	0.00	0.00	
(b) Other Federal Operating Expenditures.....	61601.84	61601.84	
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➤	61601.84	61601.84	
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00	
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00	
24. Independent Expenditure (use Schedule E)	0.00	0.00	
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00	
26. Loan Repayments Made.....	0.00	0.00	
27. Loans Made.....	0.00	0.00	
28. Refunds of Contributions To:			
(a) Individuals/Persons Other Than Political Committees	0.00	0.00	
(b) Political Party Committees	0.00	0.00	
(c) Other Political Committees (such as PACs)	0.00	0.00	
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00	
29. Other Disbursements.....	-160.00	-160.00	
30. Federal Election Activity (2 U.S.C 431(20))			
(a) Shared Federal Election Activity (from Schedule H6)			
(i) Federal Share	0.00	0.00	
(ii) "Levin" Share	0.00	0.00	
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00	
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00	
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	61441.84	61441.84	
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	61441.84	61441.84	

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

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III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	79445.00	79445.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	79445.00	79445.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	61601.84	61601.84
37. Offsets to Operating Expenditures (from Line 15, page 3)	1825.24	1825.24
38. Net Operating Expenditures (subtract Line 37 from Line 36)	59776.60	59776.60

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 / 35

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Treasure State PAC

A.

Full Name (Last, First, Middle Initial)

Jonathan M. Alexander

Mailing Address 923 15th St NW

City

Washington

State

DC

Zip Code

20005

FEC ID number of contributing
federal political committee.

C

Name of Employer
Monument Strategies, LLC

Occupation
President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 2 6 / 2 0 0 9

Transaction ID: C5518846

Amount of Each Receipt this Period

1000.00

B.

Full Name (Last, First, Middle Initial)

Patrick G. Beatty, MD

Mailing Address 7755 Grant Creek Rd

City

Missoula

State

MT

Zip Code

59808-9342

FEC ID number of contributing
federal political committee.

C

Name of Employer
Montana Cancer Specialists

Occupation
Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

850.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 1 8 / 2 0 0 9

Transaction ID: C5591969

Amount of Each Receipt this Period

850.00

C.

Full Name (Last, First, Middle Initial)

Douglas L. Beveridge

Mailing Address 1302 Waugh Dr
363

City

Houston

State

TX

Zip Code

77019-3908

FEC ID number of contributing
federal political committee.

C

Name of Employer
King Ranch Minerals

Occupation
Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 2 2 / 2 0 0 9

Transaction ID: C5779132

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

2100.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 7 / 35

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Treasure State PAC

A.

Full Name (Last, First, Middle Initial)

Michael D. Fried

Mailing Address 3547 Prestwick Rd

City

State

Zip Code

Billings

MT

59101-9468

FEC ID number of contributing
federal political committee.

C

Name of Employer
Not Employed

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 2 7 / 2 0 0 9

Transaction ID: C5593703

Amount of Each Receipt this Period

750.00

B.

Full Name (Last, First, Middle Initial)

Gila River Indian Community

Mailing Address PO Box 2160

City

State

Zip Code

Sacaton

AZ

85247

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 2 3 / 2 0 0 9

Transaction ID: C5628589

Amount of Each Receipt this Period

5000.00

C.

Full Name (Last, First, Middle Initial)

Susan Heyneman

Mailing Address 569 W Rosebud Rd

City

State

Zip Code

Fishtail

MT

59028-8005

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
rancher

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 2 7 / 2 0 0 9

Transaction ID: C5593700

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)

6250.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 35

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Treasure State PAC

A.

Full Name (Last, First, Middle Initial)

Lloyd W. Kaercher

Mailing Address 710 Summit Ave

City

Havre

State

MT

Zip Code

59501-4441

FEC ID number of contributing
federal political committee.

C

Name of Employer
None

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 1 5 / 2 0 0 9

Transaction ID: C5568838

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)

Thomas S. Kim

Mailing Address 5525 Ajuga Ct

City

Centreville

State

VA

Zip Code

20120

FEC ID number of contributing
federal political committee.

C

Name of Employer
Scribe Strategies & Advisors

Occupation
Lobbyist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 2 5 / 2 0 0 9

Transaction ID: C5518839

Amount of Each Receipt this Period

250.00

C.

Full Name (Last, First, Middle Initial)

Denny Miller

Mailing Address 2 Alexander St

City

Alexandria

State

VA

Zip Code

22314

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
Lobbyist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 1 4 / 2 0 0 9

Transaction ID: C5568831

Amount of Each Receipt this Period

5000.00

SUBTOTAL of Receipts This Page (optional)

5500.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 35

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Treasure State PAC

A.

Full Name (Last, First, Middle Initial)

Duffin Newman

Mailing Address 47544 Hidden Cove Ct

City

Sterling

State

VA

Zip Code

20165

FEC ID number of contributing
federal political committee.

C

Name of Employer
Dekimas Consulting Inc

Occupation
Owner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 2 2 / 2 0 0 9

Transaction ID: C5628587

Amount of Each Receipt this Period

1000.00

B.

Full Name (Last, First, Middle Initial)

Roy S. O'Connor

Mailing Address 125 Bank St
Ste 300

City

Missoula

State

MT

Zip Code

59802-4413

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
Rancher/Investor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 2 2 / 2 0 0 9

Transaction ID: C5779130

Amount of Each Receipt this Period

800.00

C.

Full Name (Last, First, Middle Initial)

David Robert Paoli

Mailing Address 106 E Crestline Dr

City

Missoula

State

MT

Zip Code

59803-2411

FEC ID number of contributing
federal political committee.

C

Name of Employer
Paoli, Latino & Kutzman,
P.C.

Occupation
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 2 1 / 2 0 0 9

Transaction ID: C5518784

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

2050.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 35

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Treasure State PAC

A.

Full Name (Last, First, Middle Initial)

James W Schroeder

Mailing Address 621 Nadina Pl

City

Celebration

State

FL

Zip Code

34747-4960

FEC ID number of contributing
federal political committee.

C

Name of Employer
None

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 1 8 / 2 0 0 9

Transaction ID: C5591964

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)

Tule River Tribal Council

Mailing Address PO Box 589

City

Porterville

State

CA

Zip Code

93258-0589

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 3 / 2 0 0 9

Transaction ID: C5646608

Amount of Each Receipt this Period

5000.00

C.

Full Name (Last, First, Middle Initial)

Porter Vaughan

Mailing Address PO Box 5175

City

Huntington Beach

State

CA

Zip Code

92615-5175

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
Plumber

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 1 / 2 0 0 9

Transaction ID: C5619344

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)

5750.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 35

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Treasure State PAC

A.

Full Name (Last, First, Middle Initial)

Dennis R. Washington

Mailing Address PO Box 8182

City

Missoula

State

MT

Zip Code

59807-8182

FEC ID number of contributing
federal political committee.

C

Name of Employer
Washington Corp.

Occupation
Owner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 2 / 0 3 / 2 0 0 9

Transaction ID: C5144586

Amount of Each Receipt this Period

5000.00

B.

Full Name (Last, First, Middle Initial)

Jon Yarbrough

Mailing Address Video Gaming Technologies
155 Franklin Rd

City

Brentwood

State

TN

Zip Code

37027

FEC ID number of contributing
federal political committee.

C

Name of Employer
Video Gaming Technologies

Occupation
CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 2 8 / 2 0 0 9

Transaction ID: C5782235

Amount of Each Receipt this Period

5000.00

C.

Full Name (Last, First, Middle Initial)

Eric Karl Wepsic

Mailing Address 255 W 84th St
Apt 7C

City

New York

State

NY

Zip Code

10024-4336

FEC ID number of contributing
federal political committee.

C

Name of Employer
D.E. Shaw & Co.

Occupation
Financial Analyst

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 2 9 / 2 0 0 9

Transaction ID: C5799787A

Amount of Each Receipt this Period

1000.00

* Earmarked Contribution:
See Below

SUBTOTAL of Receipts This Page (optional)

11000.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 35

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Treasure State PAC

A.

Full Name (Last, First, Middle Initial)

ActBlue

Mailing Address P.O. Box 382110

City

Cambridge

State

MA

Zip Code

02238

FEC ID number of contributing
federal political committee.

C

C00401224

Name of Employer

Occupation

Conduit total listed in Agg. field

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: C5799787AB

Amount of Each Receipt this Period

1000.00

[MEMO ITEM]

Note: Above Contribution
earmarked through this or-
ganization.

B.

Full Name (Last, First, Middle Initial)

The Mathis Group, LLC

Mailing Address 923 15th St NW

City

Washington

State

DC

Zip Code

20005

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 2 6 / 2 0 0 9

Transaction ID: C5518847

Amount of Each Receipt this Period

3000.00

LLC - Members below if it-
emized. Permissible funds.

C.

Full Name (Last, First, Middle Initial)

Chuck Harple

Mailing Address 923 15th St NW

City

Washington

State

DC

Zip Code

20005

FEC ID number of contributing
federal political committee.

C

Name of Employer
The Mathis Group, LLC

Occupation

Consultant

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 2 6 / 2 0 0 9

Transaction ID: C5518851

Amount of Each Receipt this Period

1500.00

[MEMO ITEM]

*

SUBTOTAL of Receipts This Page (optional)

3000.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 13 / 35

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Treasure State PAC

A.

Full Name (Last, First, Middle Initial)

Mike Mathis

Mailing Address 923 15th St NW

City

Washington

State

DC

Zip Code

20005

FEC ID number of contributing
federal political committee.

C

Name of Employer
The Mathis Group, LLC

Occupation
Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 2 6 / 2 0 0 9

Transaction ID: C5518850

Amount of Each Receipt this Period

1500.00

[MEMO ITEM]

*

SUBTOTAL of Receipts This Page (optional)

0.00

TOTAL This Period (last page this line number only)

35650.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 14 / 35

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Treasure State PAC

A.

Full Name (Last, First, Middle Initial)
AMERICAN ASSOCIATION OF NURSE ANESTHETISTS SEPARAT

Mailing Address 222 South Prospect Ave
C/o Finance Department

City State Zip Code
Park Ridge IL 60068

FEC ID number of contributing
federal political committee. **C** C00173153

Name of Employer Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 0 4 / 2 0 0 9

Transaction ID: C5646609

Amount of Each Receipt this Period

5000.00

B.

Full Name (Last, First, Middle Initial)
American Bankers Association

Mailing Address 1120 Connecticut Avenue NW

City State Zip Code
Washington DC 20036

FEC ID number of contributing
federal political committee. **C** C00004275

Name of Employer Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 2 1 / 2 0 0 9

Transaction ID: C5518785

Amount of Each Receipt this Period

1500.00

C.

Full Name (Last, First, Middle Initial)
American Bankers Association

Mailing Address 1120 Connecticut Avenue NW

City State Zip Code
Washington DC 20036

FEC ID number of contributing
federal political committee. **C** C00004275

Name of Employer Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 2 0 / 2 0 0 9

Transaction ID: C5592834

Amount of Each Receipt this Period

3500.00

SUBTOTAL of Receipts This Page (optional)

10000.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 15 / 35

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Treasure State PAC

A.

Full Name (Last, First, Middle Initial)
AMERICAN PHYSICAL THERAPY ASSOCIATION PHYSICAL THE

Mailing Address 1111 North Fairfax Street

City State Zip Code
Alexandria VA 22314

FEC ID number of contributing
federal political committee. **C** C00012880

Name of Employer Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 3 0 / 2 0 0 9

Transaction ID: C5524091

Amount of Each Receipt this Period

1000.00

B.

Full Name (Last, First, Middle Initial)
AMERICAN PHYSICAL THERAPY ASSOCIATION PHYSICAL THE

Mailing Address 1111 North Fairfax Street

City State Zip Code
Alexandria VA 22314

FEC ID number of contributing
federal political committee. **C** C00012880

Name of Employer Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 1 8 / 2 0 0 9

Transaction ID: C5779127

Amount of Each Receipt this Period

4000.00

C.

Full Name (Last, First, Middle Initial)
Amgen Political Action Committee

Mailing Address One Amgen Center Drive

City State Zip Code
Thousand Oaks CA 91320

FEC ID number of contributing
federal political committee. **C** C00251876

Name of Employer Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 1 4 / 2 0 0 9

Transaction ID: C5548953

Amount of Each Receipt this Period

3000.00

SUBTOTAL of Receipts This Page (optional)

8000.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 16 / 35

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Treasure State PAC

A.

Full Name (Last, First, Middle Initial)
Independent Community Bankers Political Action Com

Mailing Address 1615 L St. NW, Ste. 900

City State Zip Code
Washington DC 20036

FEC ID number of contributing
federal political committee. **C** C00032698

Name of Employer Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 8 / 2 0 0 9

Transaction ID: C5568832

Amount of Each Receipt this Period

1000.00

B.

Full Name (Last, First, Middle Initial)
INDEPENDENT INSURANCE AGENTS OF AMERICA POLITICAL

Mailing Address 412 First Street SE Suite 300

City State Zip Code
Washington DC 20003

FEC ID number of contributing
federal political committee. **C** C00022343

Name of Employer Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 9 / 2 0 0 9

Transaction ID: C5782237

Amount of Each Receipt this Period

5000.00

C.

Full Name (Last, First, Middle Initial)
MORTGAGE BANKERS ASSOCIATION POLITICAL ACTION COMM

Mailing Address 1919 Pennsylvania Ave NW
8th Floor

City State Zip Code
Washington DC 20006

FEC ID number of contributing
federal political committee. **C** C00004812

Name of Employer Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 2 7 / 2 0 0 9

Transaction ID: C5524092

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional)

7000.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 17 / 35

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Treasure State PAC

A.

Full Name (Last, First, Middle Initial)
MORTGAGE BANKERS ASSOCIATION POLITICAL ACTION COMM

Mailing Address 1919 Pennsylvania Ave NW
8th Floor

City State Zip Code
Washington DC 20006

FEC ID number of contributing
federal political committee. **C** C00004812

Name of Employer Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 2 2 / 2 0 0 9

Transaction ID: C5628588

Amount of Each Receipt this Period

4000.00

B.

Full Name (Last, First, Middle Initial)
PPL People For Good Govt - Federal

Mailing Address Two North Ninth Street

City State Zip Code
Allentown PA 18101

FEC ID number of contributing
federal political committee. **C** C00228106

Name of Employer Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: C5783457

Amount of Each Receipt this Period

5000.00

C.

Full Name (Last, First, Middle Initial)
PROPERTY CASUALTY INSURERS ASSOCIATION OF AMERICA

Mailing Address 2600 South River Road

City State Zip Code
Des Plaines IL 60018

FEC ID number of contributing
federal political committee. **C** C00066472

Name of Employer Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 2 8 / 2 0 0 9

Transaction ID: C5782232

Amount of Each Receipt this Period

2000.00

SUBTOTAL of Receipts This Page (optional)

11000.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 18 / 35

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Treasure State PAC

A.

Full Name (Last, First, Middle Initial)

TRAVELERS COMPANIES INC. POLITICAL ACTION COMMITTEE

Mailing Address One Tower Square

City

Hartford

State

CT

Zip Code

06183

FEC ID number of contributing
federal political committee.

C

C00376376

Name of Employer

Occupation

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 0 / 2 0 0 9

Transaction ID: C5593714

Amount of Each Receipt this Period

2500.00

SUBTOTAL of Receipts This Page (optional)

2500.00

TOTAL This Period (last page this line number only)

38500.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 19 / 35

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☒ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Treasure State PAC

A.

Full Name (Last, First, Middle Initial)

MONTANA VIRGINIA VICTORY FUND

Mailing Address 426 C STREET NE

City

WASHINGTON

State

DC

Zip Code

20002

FEC ID number of contributing
federal political committee.

C

C00459057

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

1776.66

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 3 1 / 2 0 0 9

Transaction ID: C5774023

Amount of Each Receipt this Period

1776.66

Reimburse Travel

SUBTOTAL of Receipts This Page (optional)

1776.66

TOTAL This Period (last page this line number only)

1776.66

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 20 / 35

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Treasure State PAC

A. Full Name (Last, First, Middle Initial) Andrew Tweeten	Transaction ID: D345215 Date of Disbursement
Mailing Address 17 N California St	<div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 2 7 / 2 0 0 9</div> </div>
City Helena State MT Zip Code 59601-4970	Amount of Each Disbursement this Period
Purpose of Disbursement Internet Consulting	<div>500.00</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Andrew Tweeten	Transaction ID: D374171 Date of Disbursement
Mailing Address 17 N California St	<div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 0 1 / 2 0 0 9</div> </div>
City Helena State MT Zip Code 59601-4970	Amount of Each Disbursement this Period
Purpose of Disbursement Internet Consulting	<div>500.00</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Andrew Tweeten	Transaction ID: D374172 Date of Disbursement
Mailing Address 17 N California St	<div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 0 1 / 2 0 0 9</div> </div>
City Helena State MT Zip Code 59601-4970	Amount of Each Disbursement this Period
Purpose of Disbursement Internet Consulting	<div>500.00</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)

1500.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 21 / 35

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
Treasure State PAC

A. Full Name (Last, First, Middle Initial) Artcraft Printers, Inc.	Transaction ID: D345240 Date of Disbursement
Mailing Address 1207 E Front St	<div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 2 8 / 2 0 0 9</div> </div>
City Butte State MT Zip Code 59701-2935	Amount of Each Disbursement this Period
Purpose of Disbursement Printing	<div> <div></div> <div>3083.17</div> </div>
Candidate Name	<div> <div></div> <div>Category/ Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Carey International	Transaction ID: D352074 Date of Disbursement
Mailing Address 4530 Wisconsin Ave NW	<div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 2 5 / 2 0 0 9</div> </div>
City Washington State DC Zip Code 20016-4627	Amount of Each Disbursement this Period
Purpose of Disbursement Travel	<div> <div></div> <div>583.95</div> </div>
Candidate Name	<div> <div></div> <div>Category/ Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Delta Airlines	Transaction ID: D352221 Date of Disbursement
Mailing Address PO Box 20706	<div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 1 2 / 2 0 0 9</div> </div>
City Atlanta State GA Zip Code 30320-6001	Amount of Each Disbursement this Period
Purpose of Disbursement Travel	<div> <div></div> <div>1169.98</div> </div>
Candidate Name	<div> <div></div> <div>Category/ Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)

4837.10

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 22 / 35

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Treasure State PAC

A.

Full Name (Last, First, Middle Initial)
Delta Airlines

Mailing Address PO Box 20706

City Atlanta State GA Zip Code 30320-6001

Purpose of Disbursement
Travel

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D352066

Date of Disbursement

03 / 12 / 2009

Amount of Each Disbursement this Period

612.00

B.

Full Name (Last, First, Middle Initial)
Delta Airlines

Mailing Address PO Box 20706

City Atlanta State GA Zip Code 30320-6001

Purpose of Disbursement
Travel

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D378972

Date of Disbursement

06 / 26 / 2009

Amount of Each Disbursement this Period

15.00

C.

Full Name (Last, First, Middle Initial)
Delta Airlines

Mailing Address PO Box 20706

City Atlanta State GA Zip Code 30320-6001

Purpose of Disbursement
Travel

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D378979

Date of Disbursement

06 / 04 / 2009

Amount of Each Disbursement this Period

1013.90

SUBTOTAL of Disbursements This Page (optional)

1640.90

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 23 / 35

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)
Treasure State PAC

A. Full Name (Last, First, Middle Initial) Delta Airlines <hr/> Mailing Address PO Box 20706 <hr/> City Atlanta State GA Zip Code 30320-6001 <hr/> Purpose of Disbursement Travel Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D378980 Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>0</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		0	3		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	6		0	3		2	0	0	9												
<hr/> City Atlanta State GA Zip Code 30320-6001 <hr/> Purpose of Disbursement Travel Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Amount of Each Disbursement this Period <table border="1"> <tr> <td colspan="10">970.50</td> </tr> </table>	970.50																			
970.50																					
B. Full Name (Last, First, Middle Initial) Direct Line Politics, Inc. <hr/> Mailing Address 2924 Argyle Dr <hr/> City Alexandria State VA Zip Code 22305 <hr/> Purpose of Disbursement Direct Mail Production for PAC Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D374155 Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>1</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		1	6		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	6		1	6		2	0	0	9												
<hr/> City Alexandria State VA Zip Code 22305 <hr/> Purpose of Disbursement Direct Mail Production for PAC Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Amount of Each Disbursement this Period <table border="1"> <tr> <td colspan="10">13192.19</td> </tr> </table>	13192.19																			
13192.19																					
C. Full Name (Last, First, Middle Initial) Grouse Mountain Lodge <hr/> Mailing Address 2 Fairway Dr <hr/> City Whitefish State MT Zip Code 59937-3254 <hr/> Purpose of Disbursement Travel Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D375561 Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>2</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		2	9		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	6		2	9		2	0	0	9												
<hr/> City Whitefish State MT Zip Code 59937-3254 <hr/> Purpose of Disbursement Travel Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Amount of Each Disbursement this Period <table border="1"> <tr> <td colspan="10">539.55</td> </tr> </table>	539.55																			
539.55																					

SUBTOTAL of Disbursements This Page (optional)

14702.24

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Treasure State PAC

A. Full Name (Last, First, Middle Initial) Grouse Mountain Lodge	Transaction ID: D378986 Date of Disbursement																				
Mailing Address 2 Fairway Dr	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>2</td><td></td><td>1</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		1	2		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	2		1	2		2	0	0	9												
City Whitefish State MT Zip Code 59937-3254	Amount of Each Disbursement this Period																				
Purpose of Disbursement Catering for PAC event Candidate Name	<table border="1"> <tr> <td colspan="10">500.00</td> </tr> </table>	500.00																			
500.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) Grouse Mountain Lodge	Transaction ID: D378974 Date of Disbursement																				
Mailing Address 2 Fairway Dr	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		3	0		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	6		3	0		2	0	0	9												
City Whitefish State MT Zip Code 59937-3254	Amount of Each Disbursement this Period																				
Purpose of Disbursement Travel Candidate Name	<table border="1"> <tr> <td colspan="10">179.85</td> </tr> </table>	179.85																			
179.85																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) Lori LaFave	Transaction ID: D374166 Date of Disbursement																				
Mailing Address 200 E Jefferson St	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>5</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		0	1		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	5		0	1		2	0	0	9												
City Falls Church State VA Zip Code 22046-3531	Amount of Each Disbursement this Period																				
Purpose of Disbursement Fundraising Services for PAC (no fed candidates) Candidate Name	<table border="1"> <tr> <td colspan="10">2500.00</td> </tr> </table>	2500.00																			
2500.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

3179.85

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Treasure State PAC

A.

Full Name (Last, First, Middle Initial)

Lori LaFave

Mailing Address 200 E Jefferson St

City Falls Church State VA Zip Code 22046-3531

Purpose of Disbursement
Fundraising Services for PAC - not fed candidates

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D374167

Date of Disbursement

05 / 01 / 2009

Amount of Each Disbursement this Period

2500.00

B.

Full Name (Last, First, Middle Initial)

Lori LaFave

Mailing Address 200 E Jefferson St

City Falls Church State VA Zip Code 22046-3531

Purpose of Disbursement
Fundraising Services for PAC - not fed candidates

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D374168

Date of Disbursement

06 / 01 / 2009

Amount of Each Disbursement this Period

2500.00

C.

Full Name (Last, First, Middle Initial)

Lori LaFave

Mailing Address 200 E Jefferson St

City Falls Church State VA Zip Code 22046-3531

Purpose of Disbursement
Fundraising Services for PAC - not fed candidates

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D345232

Date of Disbursement

02 / 27 / 2009

Amount of Each Disbursement this Period

2500.00

SUBTOTAL of Disbursements This Page (optional)

7500.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Treasure State PAC

A.

Full Name (Last, First, Middle Initial)
Lori LaFave

Mailing Address 200 E Jefferson St

City Falls Church State VA Zip Code 22046-3531

Purpose of Disbursement
Fundraising Services for PAC - not fed candidates

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D345234

Date of Disbursement

/ /

Amount of Each Disbursement this Period

B.

Full Name (Last, First, Middle Initial)
Lori LaFave

Mailing Address 200 E Jefferson St

City Falls Church State VA Zip Code 22046-3531

Purpose of Disbursement
Fundraising Services for PAC - not fed candidates

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D345236

Date of Disbursement

/ /

Amount of Each Disbursement this Period

C.

Full Name (Last, First, Middle Initial)
Montana Adventure Company

Mailing Address 2 Fairway Dr

City Whitefish State MT Zip Code 59937

Purpose of Disbursement
Catering for PAC event

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D374159

Date of Disbursement

/ /

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional)

8175.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Treasure State PAC

A. Full Name (Last, First, Middle Initial) National Car Rental	Transaction ID: D375562 Date of Disbursement																				
Mailing Address 2850 Skyway Dr	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		3	0		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	6		3	0		2	0	0	9												
City Helena State MT Zip Code 59602-1228	Amount of Each Disbursement this Period																				
Purpose of Disbursement Travel	<table border="1"> <tr> <td colspan="10">309.92</td> </tr> </table>	309.92																			
309.92																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) NGP Software, Inc.	Transaction ID: D374160 Date of Disbursement																				
Mailing Address 1225 I St NW Ste 1225	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		0	1		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	6		0	1		2	0	0	9												
City Washington State DC Zip Code 20005-5918	Amount of Each Disbursement this Period																				
Purpose of Disbursement Software	<table border="1"> <tr> <td colspan="10">300.00</td> </tr> </table>	300.00																			
300.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) NGP Software, Inc.	Transaction ID: D374161 Date of Disbursement																				
Mailing Address 1225 I St NW Ste 1225	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		2	4		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	4		2	4		2	0	0	9												
City Washington State DC Zip Code 20005-5918	Amount of Each Disbursement this Period																				
Purpose of Disbursement Software	<table border="1"> <tr> <td colspan="10">600.00</td> </tr> </table>	600.00																			
600.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

1209.92

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Treasure State PAC

A.

Full Name (Last, First, Middle Initial)
NGP Software, Inc.

Mailing Address 1225 I St NW
Ste 1225

City Washington State DC Zip Code 20005-5918

Purpose of Disbursement
Software

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D345238

Date of Disbursement

/ /

Amount of Each Disbursement this Period

600.00

B.

Full Name (Last, First, Middle Initial)
NGP Software, Inc.

Mailing Address 1225 I St NW
Ste 1225

City Washington State DC Zip Code 20005-5918

Purpose of Disbursement
Software

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D345216

Date of Disbursement

/ /

Amount of Each Disbursement this Period

300.00

C.

Full Name (Last, First, Middle Initial)
The Houstonian Hotel

Mailing Address 111 North Post Oak Lane

City Houston State TX Zip Code 77024

Purpose of Disbursement
Travel

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D352068

Date of Disbursement

/ /

Amount of Each Disbursement this Period

447.36

SUBTOTAL of Disbursements This Page (optional)

1347.36

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 29 / 35

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Treasure State PAC

A. Full Name (Last, First, Middle Initial) The Zamore Group <hr/> Mailing Address PO Box 76187	Transaction ID: D345227 Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>0</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		0	2		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		0	2		2	0	0	9												
City Washington State DC Zip Code 20013-6187 Purpose of Disbursement Compliance & Accounting Services Candidate Name <div style="border: 1px solid black; width: 50px; height: 20px; margin: 5px auto;"></div> Category/Type Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Amount of Each Disbursement this Period <div style="border: 1px solid black; width: 100%; text-align: center; padding: 5px;">2000.00</div>																				
B. Full Name (Last, First, Middle Initial) The Zamore Group <hr/> Mailing Address PO Box 76187	Transaction ID: D345229 Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>2</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		0	1		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	2		0	1		2	0	0	9												
City Washington State DC Zip Code 20013-6187 Purpose of Disbursement Compliance & Accounting Services Candidate Name <div style="border: 1px solid black; width: 50px; height: 20px; margin: 5px auto;"></div> Category/Type Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Amount of Each Disbursement this Period <div style="border: 1px solid black; width: 100%; text-align: center; padding: 5px;">2000.00</div>																				
C. Full Name (Last, First, Middle Initial) The Zamore Group <hr/> Mailing Address PO Box 76187	Transaction ID: D345230 Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>2</td><td></td><td>2</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		2	7		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	2		2	7		2	0	0	9												
City Washington State DC Zip Code 20013-6187 Purpose of Disbursement Compliance & Accounting Services Candidate Name <div style="border: 1px solid black; width: 50px; height: 20px; margin: 5px auto;"></div> Category/Type Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Amount of Each Disbursement this Period <div style="border: 1px solid black; width: 100%; text-align: center; padding: 5px;">2000.00</div>																				

SUBTOTAL of Disbursements This Page (optional) ►

6000.00

TOTAL This Period (last page this line number only) ►

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Treasure State PAC

A. Full Name (Last, First, Middle Initial) The Zamore Group <hr/> Mailing Address PO Box 76187	Transaction ID: D374163 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 0 1 / 2 0 0 9</div> </div>
<div> <div>City Washington State DC Zip Code 20013-6187</div> <div> <div>Purpose of Disbursement Compliance & Accounting Services</div> <div>Candidate Name</div> </div> <div> <div>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</div> <div>State: District:</div> </div> <div> <div>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General</div> <div><input type="checkbox"/> Other (specify) ▼</div> </div> </div> <div>Category/Type</div>	Amount of Each Disbursement this Period <div>2000.00</div>
B. Full Name (Last, First, Middle Initial) The Zamore Group <hr/> Mailing Address PO Box 76187	Transaction ID: D374164 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 0 1 / 2 0 0 9</div> </div>
<div> <div>City Washington State DC Zip Code 20013-6187</div> <div> <div>Purpose of Disbursement Compliance & Accounting Services</div> <div>Candidate Name</div> </div> <div> <div>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</div> <div>State: District:</div> </div> <div> <div>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General</div> <div><input type="checkbox"/> Other (specify) ▼</div> </div> </div> <div>Category/Type</div>	Amount of Each Disbursement this Period <div>2000.00</div>
C. Full Name (Last, First, Middle Initial) The Zamore Group <hr/> Mailing Address PO Box 76187	Transaction ID: D374165 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 0 1 / 2 0 0 9</div> </div>
<div> <div>City Washington State DC Zip Code 20013-6187</div> <div> <div>Purpose of Disbursement Compliance & Accounting Services</div> <div>Candidate Name</div> </div> <div> <div>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</div> <div>State: District:</div> </div> <div> <div>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General</div> <div><input type="checkbox"/> Other (specify) ▼</div> </div> </div> <div>Category/Type</div>	Amount of Each Disbursement this Period <div>2000.00</div>

SUBTOTAL of Disbursements This Page (optional)

6000.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Treasure State PAC

A.

Full Name (Last, First, Middle Initial)
United Airlines

Mailing Address PO Box 66100

City Chicago State IL Zip Code 60666-0100

Purpose of Disbursement
Travel

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D374156

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1219.60

B.

Full Name (Last, First, Middle Initial)
United Airlines

Mailing Address PO Box 66100

City Chicago State IL Zip Code 60666-0100

Purpose of Disbursement
Travel

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D378969

Date of Disbursement

/ /

Amount of Each Disbursement this Period

573.20

C.

Full Name (Last, First, Middle Initial)
US Airways

Mailing Address 4000 E Sky Harbor Blvd

City Phoenix State AZ Zip Code 85034-3802

Purpose of Disbursement
Travel

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D345219

Date of Disbursement

/ /

Amount of Each Disbursement this Period

159.20

SUBTOTAL of Disbursements This Page (optional)

1952.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Treasure State PAC

A.

Full Name (Last, First, Middle Initial)
US Airways

Mailing Address 4000 E Sky Harbor Blvd

City Phoenix State AZ Zip Code 85034-3802

Purpose of Disbursement
Travel

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D352073

Date of Disbursement

/ /

Amount of Each Disbursement this Period

B.

Full Name (Last, First, Middle Initial)
US Airways

Mailing Address 4000 E Sky Harbor Blvd

City Phoenix State AZ Zip Code 85034-3802

Purpose of Disbursement
Travel

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D352067

Date of Disbursement

/ /

Amount of Each Disbursement this Period

C.

Full Name (Last, First, Middle Initial)
US Airways

Mailing Address 4000 E Sky Harbor Blvd

City Phoenix State AZ Zip Code 85034-3802

Purpose of Disbursement
Travel

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D352076

Date of Disbursement

/ /

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Treasure State PAC

A.

Full Name (Last, First, Middle Initial)
US Postal Service

Mailing Address 900 Brentwood Rd NE

City Washington State DC Zip Code 20066-0001

Purpose of Disbursement
Postage

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D374154

Date of Disbursement

06 / 09 / 2009

Amount of Each Disbursement this Period

500.00

B.

Full Name (Last, First, Middle Initial)
US Postal Service

Mailing Address 900 Brentwood Rd NE

City Washington State DC Zip Code 20066-0001

Purpose of Disbursement
BRM Permit Fee

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D374162

Date of Disbursement

04 / 24 / 2009

Amount of Each Disbursement this Period

180.00

C.

Full Name (Last, First, Middle Initial)
Lori LaFave

Mailing Address 200 E Jefferson St

City Falls Church State VA Zip Code 22046-3531

Purpose of Disbursement
Reimburse Catering

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D374169

Date of Disbursement

03 / 30 / 2009

Amount of Each Disbursement this Period

250.86

SUBTOTAL of Disbursements This Page (optional)

930.86

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Treasure State PAC

A.

Full Name (Last, First, Middle Initial)
Schneider's of Capitol Hill

Mailing Address 300 Massachusetts Ave NE

City Washington State DC Zip Code 20002

Purpose of Disbursement
Catering for PAC event

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D374170

Date of Disbursement

/ /

Amount of Each Disbursement this Period

250.86

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

60592.63

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Treasure State PAC

A.

Full Name (Last, First, Middle Initial)
Cheryl Steenson Committee

Mailing Address PO Box 3145

City State Zip Code
Kalispell MT 59903

Purpose of Disbursement
Void 9/25/08 check

Candidate Name
Cheryl Steenson Committee

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Category/
Type

Transaction ID: D374158

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	0		2	0	0	9

Amount of Each Disbursement this Period

-160.00

SUBTOTAL of Disbursements This Page (optional)

-160.00

TOTAL This Period (last page this line number only)

-160.00